1/	Vendell PULILIAMS	Assemb	ムエタ	
Candidate's Name(print)		Office ·	Dist	rict (if a pp licable)
3	701 Fortine	Du LU891	55	9-4375
Mailing Address (include city and zip code)		-	. Tele	phone Number
1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Report Re	BER 2 - DUE Ont Period Begins: August Period Ends: October Period Ends:	t 24, 2000 t 25, 2000	,,
	2. From Report Number 1, total amount 3. Report Number 2, amount of contr 4. Report Number 2, total amount of From Report Numbers 1 and contributions of \$100 or less 5. Interest and income earned, if any, 6. TOTAL AMOUNT OF ALL CO	int of contributions of Sibutions in excess of \$10 contributions of \$100 or \$2, actual number of \$100 during this report period	00 or less <u>\$</u>	7,450 100 4900 250
	(add lines 1 through 5)		# (14,700
EXPENSES SUMMARY				
	7. From Report Number 1, total amount of expenses in excess of \$100			-2,7-7-45
8. From Report Number 1, total amount of exp		unt of expenses of \$100	or less 44	950.75
	9. Report Number 2, total amount of	expenses in excess of \$1	00 <u>4/</u>	24,570
	10. Report Number 2, total amount of	-	<u>&</u>	571
	11 TOTAL AMOUNT OF ALL EX	PENSES		ļ

If no contributions or expenses are listed during this Report Period, only this page of the report needs to be filed with your filing officer.

Executed on Date

| Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Date | Dat

Prescribed by Secretary of State NRS 294A-120, 294A-200 EL201.002(rev. 04/00)

(add lines 7 through 10)

Total number of pages for this report